

**REPORT OF RECEIPTS AND DISBURSEMENTS  
FOR A COMMITTEE OR ORGANIZATION  
SUPPORTING A NOMINATING CONVENTION  
(Summary Page)**

1. (a) Name of Committee (in full) <b>2016 DNCC Inc.</b>	2. FEC Identification Number C00571133
(b) Address (Number and Street) 430 South Capitol Street, SE	3. Type of Committee/Organization: <input checked="" type="checkbox"/> Convention Committee <input type="checkbox"/> Host Committee <input type="checkbox"/> Other _____ <div align="right">(specify)</div>
(c) City, State and ZIP Code Washington DC 20003	

## 4. TYPE OF REPORT (Check appropriate box(es)):

(a) ☐ POST CONVENTION REPORT☐ QUARTERLY REPORT (check one)☐ April 15☒ July 15☐ October 15☐ January 31☐ FINAL REPORT

(b) Is this an Amendment?

☒ YES☐ NO**SUMMARY OF RECEIPTS AND DISBURSEMENTS**

5. Covering Period FROM: 04/01/2015 THROUGH: 06/30/2015

SECTION A — CASH BALANCE SUMMARY	Column A This Period	Column B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2015		0.00
(b) Cash on Hand at Beginning of Reporting Period	399.97	
(c) Total Receipts (From Line 20)	800024.04	800524.04
(d) Subtotal (Add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	800424.01	800524.04
7. Total Disbursements (From Line 25)	164471.36	164571.39
8. Cash on Hand at Close of Reporting Period (Subtract Line 7 from Line 6(d))	635952.65	635952.65
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C or Schedule D)	0.00	
SECTION B — SUMMARY OF EXPENDITURES SUBJECT TO LIMITATIONS		
11. Convention Expenditures (From Line 21(c))	164471.36	164571.39
12. Refunds, Rebates, Returns of Deposits Relating to Convention Expenditures (From Line 17(c))	24.04	24.04
(a) Expenditures Subject to Limitation (Subtract Line 12 from Line 11)	164447.32	164547.35
(b) Expenditures from Prior Years Subject to Limitation	0.00	0.00
(c) Total Expenditures Subject to Limitation (Add Lines 12(a) and 12(b))		164547.35

*I certify that I have examined this report, and to the best of my knowledge and belief it is true, correct and complete.*

Bradley Marshall

[Electronically Filed]

07/15/2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 437g.

For Further  
Information  
Contact: Federal Election Commission  
Toll Free 800/424-9530  
Local 202/694-1100

FE1AN056

FEC FORM 4 (Revised 1/2001)

**DETAILED SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS  
(Page 2 of FEC Form 4)**

Name of Committee (in Full) <b>2016 DNCC Inc.</b>	Report Covering the Period: FROM: 04/01/2015 TO: 06/30/2015	
<b>RECEIPTS</b>	Column A This Period	Column B Calendar Year-to-Date
13. Federal Funds (Itemize all on Schedule A)	0.00	0.00
14. Contributions to Defray Convention Expenses:		
(a) Itemized (Use Schedule A)	0.00	
(b) Unitemized	0.00	
(c) Subtotal of Contributions to Defray Convention Expenses (Add Lines 14(a) and 14(b))	0.00	0.00
15. Transfers from Affiliated Committees	800000.00	800500.00
16. Loans and Loan Repayments Received (Add Lines 16(a) and 16(b))		
(a) Loans Received	0.00	
(b) Loan Repayments Received	0.00	
(c) Subtotal of Loans and Loan Repayments Received (Add Lines 14a and 14b)	0.00	0.00
17. Refunds, Rebates, Returns of Deposits Relating to Convention Expenditures:		
(a) Itemized (Use Schedule A)	0.00	
(b) Unitemized	24.04	
(c) Subtotal of Refunds, Rebates, Returns of Deposits Relating to Convention Expenditures (Add Lines 17(a) and 17(b))	24.04	24.04
18. Other Refunds, Rebates, Returns of Deposits:		
(a) Itemized Other Refunds, Rebates, Returns of Deposits	0.00	
(b) Unitemized Other Refunds, Rebates, Returns of Deposits	0.00	
(c) Subtotal of Other Refunds, Rebates, Returns of Deposits (Add Lines 18(a) and 18(b))	0.00	0.00
19. Other Income:		
(a) Itemized (Use Schedule A)	0.00	
(b) Unitemized	0.00	
(c) Subtotal of Other Income (Add Lines 19(a) and 19(b))	0.00	0.00
20. TOTAL RECEIPTS (Add Lines 13, 14(c), 15, 16(c), 17(c), 18(c) and 19(c))	800024.04	800524.04
<b>DISBURSEMENTS</b>		
21. Convention Expenditures:		
(a) Itemized (Use Schedule B)	164341.36	
(b) Unitemized	130	
(c) Subtotal of Convention Expenditures (Add Lines 21(a) and 21(b))	164471.36	164571.39
22. Transfers to Affiliated Committees	0.00	0.00
23. Loans and Loan Repayments Made:		
(a) Loans Made	0.00	
(b) Loan Repayments Made	0.00	
(c) Subtotal of Loans and Loan Repayments Made (Add Lines 23(a) and 23(b))	0.00	0.00
24. Other Disbursements:		
(a) Itemized (Use Schedule B)	0.00	
(b) Unitemized	0.00	
(c) Subtotal of Other Disbursements (Add Lines 24(a) and 24(b))	0.00	0.00
25. TOTAL DISBURSEMENTS (Add Lines 21(c), 22, 23(c) and 24(c))	164471.36	164571.39

# **SCHEDULE A (FEC Form 4)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 3 OF 19

(check only one)

☐ 13 ☐ 14a ☒ 15 ☐ 16a  
☐ 16b ☐ 17a ☐ 18a ☐ 19a

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NAME OF COMMITTEE (In Full)

2016 DNCC Inc.

Full Name (Last, First, Middle Initial)

## **A. DNC SERVICES CORP**

Mailing Address 430 SOUTH CAPITAL STREET SE

City State Zip Code  
Washington DC 20003

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2015

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

04 / 27 / 2015

Transaction ID : SA15-45

Amount of Each Receipt this Period

100000.00

Full Name (Last, First, Middle Initial)

## **B. DNC SERVICES CORP**

Mailing Address 430 SOUTH CAPITAL STREET SE

City State Zip Code  
Washington DC 20003

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2015

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

05 / 19 / 2015

Transaction ID : SA15-46

Amount of Each Receipt this Period

150000.00

Full Name (Last, First, Middle Initial)

## **C. DNC SERVICES CORP**

Mailing Address 430 SOUTH CAPITAL STREET SE

City State Zip Code  
Washington DC 20003

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2015

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

06 / 29 / 2015

Transaction ID : SA15-47

Amount of Each Receipt this Period

550000.00

**SUBTOTAL** of Receipts This Page (optional) .....

800000.00

**TOTAL** This Period (last page this line number only) .....

800000.00

**SCHEDULE B (FEC Form 4)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**2016 DNCC Inc.**

Full Name (Last, First, Middle Initial)

**A. AMALGAMATED BANK**

Mailing Address 275 7TH AVE

City State Zip Code  
NEW YORK NY 10001Purpose of Disbursement  
Bank Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2015  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
04 23 2015

Amount of Each Disbursement this Period

26.97

Transaction ID : SB21A-16

**B. CASEY FRARY**Mailing Address 504 2ND ST SE  
APT B3City State Zip Code  
Washington DC 20003Purpose of Disbursement  
Salaries

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2015  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
04 30 2015

Amount of Each Disbursement this Period

1531.50

Transaction ID : SB21A-27

**C. ADP, INC.**

Mailing Address P.O. BOX 9001007

City State Zip Code  
Louisville KY 40290-1007Purpose of Disbursement  
Payroll Taxes

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2015  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
04 30 2015

Amount of Each Disbursement this Period

729.30

Transaction ID : SB21A-28

**SUBTOTAL** of Disbursements This Page (optional) .....**TOTAL** This Period (last page this line number only) .....

2287.77

**SCHEDULE B (FEC Form 4)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**2016 DNCC Inc.**

Full Name (Last, First, Middle Initial)

**A. ADP, INC.**

Mailing Address P.O. BOX 9001007

City State Zip Code  
Louisville KY 40290-1007Purpose of Disbursement  
Payroll Processing Charges

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2015  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 08 / 2015

Amount of Each Disbursement this Period

793.51

Transaction ID : SB21A-18

**B. CASEY FRARY**Mailing Address 504 2ND ST SE  
APT B3City State Zip Code  
Washington DC 20003Purpose of Disbursement  
Salaries

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2015  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 15 / 2015

Amount of Each Disbursement this Period

2007.02

Transaction ID : SB21A-29

**C. ADP, INC.**

Mailing Address P.O. BOX 9001007

City State Zip Code  
Louisville KY 40290-1007Purpose of Disbursement  
Payroll Processing Charges

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2015  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 15 / 2015

Amount of Each Disbursement this Period

272.58

Transaction ID : SB21A-19

**SUBTOTAL** of Disbursements This Page (optional) .....**TOTAL** This Period (last page this line number only) .....

3073.11

**SCHEDULE B (FEC Form 4)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**2016 DNCC Inc.**

Full Name (Last, First, Middle Initial)

**A. ADP, INC.**

Mailing Address P.O. BOX 9001007

City State Zip Code  
Louisville KY 40290-1007Purpose of Disbursement  
Payroll Taxes

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2015  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
05 15 2015

Amount of Each Disbursement this Period

1115.04

Transaction ID : SB21A-23

**B. MATTHEW BUTLER**Mailing Address 1315 W ST NW  
APT 229City State Zip Code  
Washington DC 20003Purpose of Disbursement  
Event Consulting

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2015  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
05 18 2015

Amount of Each Disbursement this Period

16666.00

Transaction ID : SB21A-6

**C. LEAH D. DAUGHTRY**Mailing Address 700 7TH STREET SW  
SUITE 201City State Zip Code  
Washington DC 20024Purpose of Disbursement  
Event Consulting

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2015  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
05 19 2015

Amount of Each Disbursement this Period

20833.00

Transaction ID : SB21A-7

**SUBTOTAL** of Disbursements This Page (optional) .....**TOTAL** This Period (last page this line number only) .....

38614.04

**SCHEDULE B (FEC Form 4)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
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NAME OF COMMITTEE (In Full)

**2016 DNCC Inc.**

Full Name (Last, First, Middle Initial)

**A. LEAH D. DAUGHTRY**Mailing Address 700 7TH STREET SW  
SUITE 201City State Zip Code  
Washington DC 20024Purpose of Disbursement  
Event Consulting

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2015  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
05 19 2015

Amount of Each Disbursement this Period

20833.00

Transaction ID : SB21A-8

**B. ADP, INC.**

Mailing Address P.O. BOX 9001007

City State Zip Code  
Louisville KY 40290-1007Purpose of Disbursement  
Payroll Processing Charges

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2015  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
05 22 2015

Amount of Each Disbursement this Period

73.90

Transaction ID : SB21A-20

**C. BRITTANI BLACKWELL**Mailing Address 421 EVART ST NE  
APT 2City State Zip Code  
Washington DC 20017Purpose of Disbursement  
Salaries

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2015  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
05 29 2015

Amount of Each Disbursement this Period

1590.10

Transaction ID : SB21A-25

**SUBTOTAL** of Disbursements This Page (optional) .....**TOTAL** This Period (last page this line number only) .....

22497.00

**SCHEDULE B (FEC Form 4)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
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Detailed Summary PageFOR LINE NUMBER:  
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☒ 21a ☐ 22 ☐ 23a ☐ 23b ☐ 24a

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NAME OF COMMITTEE (In Full)

**2016 DNCC Inc.**

Full Name (Last, First, Middle Initial)

**A. CASEY FRARY**Mailing Address 504 2ND ST SE  
APT B3

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Salaries

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2015  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
05 29 2015

Amount of Each Disbursement this Period

2007.01

Transaction ID : SB21A-24

**B. AMALGAMATED BANK**

Mailing Address 275 7TH AVE

City NEW YORK State NY Zip Code 10001

Purpose of Disbursement  
Bank Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2015  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
05 29 2015

Amount of Each Disbursement this Period

27.59

Transaction ID : SB21A-17

**C. ADP, INC.**

Mailing Address P.O. BOX 9001007

City Louisville State KY Zip Code 40290-1007

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2015  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
05 29 2015

Amount of Each Disbursement this Period

1969.83

Transaction ID : SB21A-26

**SUBTOTAL** of Disbursements This Page (optional) .....**TOTAL** This Period (last page this line number only) .....

4004.43



**SCHEDULE B (FEC Form 4)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
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☒ 21a ☐ 22 ☐ 23a ☐ 23b ☐ 24a

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NAME OF COMMITTEE (In Full)

**2016 DNCC Inc.**

Full Name (Last, First, Middle Initial)

**A. ADP, INC.**

Mailing Address P.O. BOX 9001007

City State Zip Code  
Louisville KY 40290-1007Purpose of Disbursement  
Payroll Processing Charges

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2015  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
06 05 2015

Amount of Each Disbursement this Period

278.54

Transaction ID : SB21A-21

**B. KAREN BURCHARD**Mailing Address 2409 CLARENDON BLVD  
#905City State Zip Code  
ARLINGTON VA 22201Purpose of Disbursement  
Event Consulting

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2015  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
06 15 2015

Amount of Each Disbursement this Period

2500.00

Transaction ID : SB21A-9

**C. MATTHEW BUTLER**Mailing Address 1315 W ST NW  
APT 229City State Zip Code  
Washington DC 20003Purpose of Disbursement  
Event Consulting

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2015  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
06 15 2015

Amount of Each Disbursement this Period

16666.00

Transaction ID : SB21A-10

**SUBTOTAL** of Disbursements This Page (optional) .....**TOTAL** This Period (last page this line number only) .....

19444.54

**SCHEDULE B (FEC Form 4)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
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Detailed Summary PageFOR LINE NUMBER:  
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☒ 21a ☐ 22 ☐ 23a ☐ 23b ☐ 24a

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NAME OF COMMITTEE (In Full)

**2016 DNCC Inc.**

Full Name (Last, First, Middle Initial)

**A. CDM & ASSOCIATES**

Mailing Address 260 18TH STREET NW #10214

City ATLANTA State GA Zip Code 30363

Purpose of Disbursement  
Event Consulting

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2015  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
06 15 2015

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB21A-11

**B. CDM & ASSOCIATES**

Mailing Address 260 18TH STREET NW #10214

City ATLANTA State GA Zip Code 30363

Purpose of Disbursement  
Event Consulting

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2015  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
06 15 2015

Amount of Each Disbursement this Period

7500.00

Transaction ID : SB21A-12

**C. TRAVIS DREDD**Mailing Address 1223 WILSHIRE BLVD  
#168

City SANTA MONICA State CA Zip Code 90403

Purpose of Disbursement  
Event Consulting

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2015  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
06 15 2015

Amount of Each Disbursement this Period

14583.00

Transaction ID : SB21A-13

SUBTOTAL of Disbursements This Page (optional) .....

TOTAL This Period (last page this line number only) .....

24083.00

**SCHEDULE B (FEC Form 4)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21a ☐ 22 ☐ 23a ☐ 23b ☐ 24a

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NAME OF COMMITTEE (In Full)

**2016 DNCC Inc.**

Full Name (Last, First, Middle Initial)

**A. KELLY & ASSOCIATES INSURANCE GROUP**

Mailing Address P.O. BOX 418926

City State Zip Code  
BOSTON MA 02241-8926Purpose of Disbursement  
Benefits Cost

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2015 ☐ Primary ☒ General ☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
06 15 2015

Amount of Each Disbursement this Period

1418.15

Transaction ID : SB21A-14

**B. KELLY & ASSOCIATES INSURANCE GROUP**

Mailing Address P.O. BOX 418926

City State Zip Code  
BOSTON MA 02241-8926Purpose of Disbursement  
Benefits Cost

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2015 ☐ Primary ☒ General ☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
06 15 2015

Amount of Each Disbursement this Period

600.70

Transaction ID : SB21A-15

**C. BRITTANI BLACKWELL**Mailing Address 421 EVART ST NE  
APT 2City State Zip Code  
Washington DC 20017Purpose of Disbursement  
Salaries

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2015 ☐ Primary ☒ General ☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
06 15 2015

Amount of Each Disbursement this Period

1590.09

Transaction ID : SB21A-34

**SUBTOTAL** of Disbursements This Page (optional) .....**TOTAL** This Period (last page this line number only) .....

3608.94

**SCHEDULE B (FEC Form 4)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**2016 DNCC Inc.**

Full Name (Last, First, Middle Initial)

**A. CASEY FRARY**Mailing Address 504 2ND ST SE  
APT B3

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Salaries

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2015  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
06 15 2015

Amount of Each Disbursement this Period

2007.02

Transaction ID : SB21A-35

**B. ADP, INC.**

Mailing Address P.O. BOX 9001007

City Louisville State KY Zip Code 40290-1007

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2015  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
06 15 2015

Amount of Each Disbursement this Period

1957.67

Transaction ID : SB21A-36

**C. LEAH D. DAUGHTRY**Mailing Address 700 7TH STREET SW  
SUITE 201

City Washington State DC Zip Code 20024

Purpose of Disbursement  
Event Consulting

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2015  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
06 16 2015

Amount of Each Disbursement this Period

20833.00

Transaction ID : SB21A-22

**SUBTOTAL** of Disbursements This Page (optional) .....**TOTAL** This Period (last page this line number only) .....

24797.69

**SCHEDULE B (FEC Form 4)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**2016 DNCC Inc.**

Full Name (Last, First, Middle Initial)

**A. AMERICAN EXPRESS**

Mailing Address P.O. BOX 360001

City

FT. LAUDERDALE

State

FL

Zip Code

33336-0001

Purpose of Disbursement

Travel

Candidate Name

Category/  
Type

Office Sought:

☐

House

☐

Senate

☐

President

Disbursement For: 2015

☐

Primary

☒

General

☐

Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY  
06 / 17 / 2015

Amount of Each Disbursement this Period

1275.92

Transaction ID : SB21A-30

See Attached Memo Entry

Full Name (Last, First, Middle Initial)

**B. AMTRAK**

Mailing Address UNION STATION

City

WASHINGTON

State

DC

Zip Code

20005

Purpose of Disbursement

Travel

Candidate Name

Category/  
Type

Office Sought:

☐

House

☐

Senate

☐

President

Disbursement For: 2015

☐

Primary

☒

General

☐

Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY  
06 / 17 / 2015

Amount of Each Disbursement this Period

723.00

Transaction ID : SB21A-30-10000

[MEMO ITEM]

Memo Entry

Full Name (Last, First, Middle Initial)

**C. DELTA AIRLINES**

Mailing Address 1030 DELTA BLVD

City

ATLANTA

State

GA

Zip Code

30354

Purpose of Disbursement

Travel

Candidate Name

Category/  
Type

Office Sought:

☐

House

☐

Senate

☐

President

Disbursement For: 2015

☐

Primary

☒

General

☐

Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY  
06 / 17 / 2015

Amount of Each Disbursement this Period

383.60

Transaction ID : SB21A-30-20000

[MEMO ITEM]

Memo Entry

SUBTOTAL of Disbursements This Page (optional) .....

TOTAL This Period (last page this line number only) .....

1275.92

**SCHEDULE B (FEC Form 4)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**2016 DNCC Inc.**

Full Name (Last, First, Middle Initial)

**A. UBER**

Mailing Address 182 HOARD ST

City State Zip Code  
SAN FRANCISCO CA 94105Purpose of Disbursement  
Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2015  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
06 / 17 / 2015

Amount of Each Disbursement this Period

162.82

Transaction ID : SB21A-30-30000

**[MEMO ITEM]**

Memo Entry

**B. NYC TAXI**

Mailing Address 37-3 21ST ST

City State Zip Code  
WASHINGTON DC 20005Purpose of Disbursement  
Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2015  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
06 / 17 / 2015

Amount of Each Disbursement this Period

6.50

Transaction ID : SB21A-30-40000

**[MEMO ITEM]**

Memo Entry

**C. AMERICAN EXPRESS**

Mailing Address P.O. BOX 360001

City State Zip Code  
FT. LAUDERDALE FL 33336-0001Purpose of Disbursement  
Internet

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2015  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
06 / 17 / 2015

Amount of Each Disbursement this Period

49.90

Transaction ID : SB21A-31

See Attached Memo Entry

**SUBTOTAL** of Disbursements This Page (optional) .....**TOTAL** This Period (last page this line number only) .....

49.90

**SCHEDULE B (FEC Form 4)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**2016 DNCC Inc.**

Full Name (Last, First, Middle Initial)

**A. GOGO INFLIGHT**

Mailing Address 1250 N ARLINGTON HEIGHTS RD

City ITASCA State IL Zip Code 60143

Purpose of Disbursement  
Internet

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2015  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
06 / 17 / 2015

Amount of Each Disbursement this Period

41.90

Transaction ID : SB21A-31-10000

**[MEMO ITEM]**

Memo Entry

Full Name (Last, First, Middle Initial)

**B. SWA INFLIGHT**

Mailing Address 4353 PARK TERRACE DR

City WESTLAKE VILLAGE State CA Zip Code 91361

Purpose of Disbursement  
Internet

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2015  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
06 / 17 / 2015

Amount of Each Disbursement this Period

8.00

Transaction ID : SB21A-31-20000

**[MEMO ITEM]**

Memo Entry

Full Name (Last, First, Middle Initial)

**C. AMERICAN EXPRESS**

Mailing Address P.O. BOX 360001

City FT. LAUDERDALE State FL Zip Code 33336-0001

Purpose of Disbursement  
Site and Equipment Rental

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2015  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
06 / 17 / 2015

Amount of Each Disbursement this Period

1600.00

Transaction ID : SB21A-32

See Attached Memo Entry

**SUBTOTAL** of Disbursements This Page (optional) .....**TOTAL** This Period (last page this line number only) .....

1600.00

**SCHEDULE B (FEC Form 4)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
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NAME OF COMMITTEE (In Full)

**2016 DNCC Inc.**

Full Name (Last, First, Middle Initial)

**A. OMNI SHOREHAM HOTEL**

Mailing Address 2500 CALVERT ST NW

City State Zip Code  
WASHINGTON DC 20005Purpose of Disbursement  
Site and Equipment Rental

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2015  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
06 / 17 / 2015

Amount of Each Disbursement this Period

1600.00

Transaction ID : SB21A-32-10000

**[MEMO ITEM]**

Memo Entry

**B. AMERICAN EXPRESS**

Mailing Address P.O. BOX 360001

City State Zip Code  
FT. LAUDERDALE FL 33336-0001Purpose of Disbursement  
Office Supplies/Exp

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2015  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
06 / 17 / 2015

Amount of Each Disbursement this Period

122.93

Transaction ID : SB21A-33

See Attached Memo Entry

**C. FEDEX**

Mailing Address 208 2ND ST SE

City State Zip Code  
WASHINGTON DC 20005Purpose of Disbursement  
Office Supplies/Exp

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2015  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
06 / 17 / 2015

Amount of Each Disbursement this Period

122.93

Transaction ID : SB21A-33-10000

**[MEMO ITEM]**

Memo Entry

**SUBTOTAL** of Disbursements This Page (optional) .....**TOTAL** This Period (last page this line number only) .....

122.93



**SCHEDULE B (FEC Form 4)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**2016 DNCC Inc.**

Full Name (Last, First, Middle Initial)

**A. ADP, INC.**

Mailing Address P.O. BOX 9001007

City State Zip Code  
Louisville KY 40290-1007Purpose of Disbursement  
Payroll Processing Charges

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2015  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
06 19 2015

Amount of Each Disbursement this Period

542.71

Transaction ID : SB21A-44

**B. KAZE DESIGN**Mailing Address 1605 7TH STREET NW  
SPACE 9City State Zip Code  
WASHINGTON DC 20001Purpose of Disbursement  
Media Production

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2015  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
06 30 2015

Amount of Each Disbursement this Period

2833.33

Transaction ID : SB21A-43

**C. BRITTANI BLACKWELL**Mailing Address 421 EVART ST NE  
APT 2City State Zip Code  
Washington DC 20017Purpose of Disbursement  
Salaries

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2015  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
06 30 2015

Amount of Each Disbursement this Period

1590.11

Transaction ID : SB21A-37

**SUBTOTAL** of Disbursements This Page (optional) .....**TOTAL** This Period (last page this line number only) .....

4966.15

**SCHEDULE B (FEC Form 4)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
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NAME OF COMMITTEE (In Full)

**2016 DNCC Inc.**

Full Name (Last, First, Middle Initial)

**A. CASEY FRARY**Mailing Address 504 2ND ST SE  
APT B3

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Salaries

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2015  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
06 30 2015

Amount of Each Disbursement this Period

2007.01

Transaction ID : SB21A-38

**B. VICTORIA MEANEY**

Mailing Address 10715 HUNTERS CHASE LANE

City DAMASCUS State MD Zip Code 20872

Purpose of Disbursement  
Salaries

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2015  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
06 30 2015

Amount of Each Disbursement this Period

1514.55

Transaction ID : SB21A-39

**C. APRIL MELLODY**Mailing Address 4923 ESSEX AVE  
APT 10

City NARBERTH State PA Zip Code 19072

Purpose of Disbursement  
Salaries

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2015  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
06 30 2015

Amount of Each Disbursement this Period

4803.43

Transaction ID : SB21A-40

**SUBTOTAL** of Disbursements This Page (optional) .....**TOTAL** This Period (last page this line number only) .....

8324.99

**SCHEDULE B (FEC Form 4)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**2016 DNCC Inc.**

Full Name (Last, First, Middle Initial)

**A. ADP, INC.**

Mailing Address P.O. BOX 9001007

City

State

Zip Code

Louisville

KY

40290-1007

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2015

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY  
06 / 30 / 2015

Amount of Each Disbursement this Period

5590.95

Transaction ID : SB21A-41

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional) .....**TOTAL** This Period (last page this line number only) .....

5590.95

164341.36